Undergraduate Training Program This is an Employment Opportunity

(Please type or print)			
Name:		High School	
Address:		(Please indicate if "magnet" school, technical school, inner-city, etc)	
		Address	
none: ()		City/State Zip:	
E-mail Address:		City/State Zip: Principal:	
SSN:		Minimum Eligibility: GPA 3.0 and SAT 1100 or GPA 3.0 and ACT 25	
ate of Birth:		High School GPA:/4.0 Weighted:	
S. Citizenship:YN (MUST B	BE U.S. CITIZEN)	SAT Results: Math Verbal _	
Your responses in this section are voluntary agency personnel practices meet the requi to answer, please answer each question to Do you have any physical disabilities? Race: Native American or Alaskar Asian or Pacific Islander Black White Oth Gender: Male Female Hispanic Origin Not or	rements of Federal law. If you do choose the best of your ability. YN n native ner (please specify)	and/or ACT Results (composited):	N
lease list any relatives that are employed	d by the NSA and their relationship to you:		
as the NSA ever employed you? If yes, v	when:		
Application Package Checklist: etter of recommendation (1) essay (1 page)	Resume (1 page) Supplemental Information, optional 3 pages		
Transcripts: provide high school transcript provide college transcripts for college cou	r; please list honors courses, AP courses, and IB cour Fress taken for credit.	ses on a separate piece of paper; provide test s	scores for AP courses;
college board or ACT scores; test must b	e taken not later than 30 November 2001 to be consi	dered.	
Signature		 Date	

PRIVACY ACT STATEMENT. The request of this information is authorized by Public Law 86-36. The request for your Social Security Number is authorized by Executive Order 9397. The information will be used to evaluate applicant eligibility for participation in the Undergraduate Training Program. The Social Security Number will be used to identify the individual. We sometimes provide information on applicants to other government agencies which express interest in recruiting such applicants. Disclosure of your Social Security Number and the requested information is voluntary. Not providing your Social Security Number may delay processing. Not providing the remainder of the requested information may result in non-selection for participation in the Undergraduate Training Program.

^{*} This Application is valid through Nov 30th, 2001